| ORDER FOR SUPPLIES OR SERVICES  |  |                      |  |                           |                                 |  |                                       |   |                     |                                     |  | PAGE 1 OF 3                |
|---|--|----------------------|--|---------------------------|---------------------------------|--|---------------------------------------|---|---------------------|-------------------------------------|--|----------------------------|
|   |  |                      |  |                           |                                 |  |                                       |   |                     |                                     |  |                            |
| 1. CONTRACT PURCH ORDER/AGREEMENT NO.   |  |                      |  | 2. DELIVERY ORDER/CALL NO |                                 | /CALL NO.  | 3. DATE OF ORDER/CALL<br>(YYYYMMMDD)  |   |                     |                                     | QUEST NO.  | 5. PRIORITY                |
| W56HZV-06-D-0072         0003           6. ISSUED BY         CODE         W56HZV  |  |                      |  | W56HZV                    | 7. ADMINIST                     | 2007MAY22 SEE SCHEDULE  ADMINISTERED BY (If other than 6) CODE   |                                       |   | 2305A               | DOA4 8. DELIVERY FOB                |  |                            |
| U.S. ARMY TACOM LCMC AMSTA-AQ-ATAC CYNTHIA AUSTIN (586)574-8121 WARREN, MICHIGAN 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL WEAPON SYSTEM: WPN SYS: P2 EMAIL: CYNTHIA.AUSTIN@US.ARMY.MIL                                  |  |                      |  |                           | U.S<br>(<br>ATT                 | TA DETROIT  TACOM)  TO DCMAE-GJI  REN, MI 4833   | 37                                    | DESTINATION  X OTHER  (See Schedule if other) |                     |                                     |  |                            |
| 9. CONTRACTOR CODE 1A424  |  |                      |  |                           | FACIL                           |  | 10. DE                                | LIVER TO F                                    |                     | 11. X IF BUSINESS IS                |  |                            |
| LANZEN FABRICATING INC 30980 GROESBECK HWY NAME AND ADDRESS   |  |                      |  |                           |                                 | SEE SCHEDULE  12. DISCOUNT TERMS   |                                       |   |                     |                                     | X SMALL SMALL DISADVANTAGED WOMAN-OWNED                                    |                            |
|   | • TYPE E                               | BUSI                 | NESS: Other Sma  | all Busi                  | iness Perí                      | forming in   | •<br>U.S.                             |   |                     | ES TO THE ADDRESS                   | IN BLOCK   |                            |
| TYPE BUSINESS: Other Small Business Performance CODE 14. SHIP TO SEE SCHEDULE   |  |                      |  |                           | 15. PAYMEN<br>DFA<br>DFA<br>P.O | OFMING IN U.S.   See Block 15  IS. PAYMENT WILL BE MADE BY  DFAS - COLUMBUS CENTER  DFAS-CO/NORTH ENTITLEMENT OPERATION  P.O. BOX 182266  COLUMBUS OH 43218-2266 |                                       |   |                     |                                     | MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2 |                            |
| 16.<br>TYPE   | DELIVERY/<br>CALL                      | Х                    | THIS DELIVERY ORDER  | R IS ISSUED               | ON ANOTHER (                    | GOVERNMENT AC  | GENCY OR IN ACCOR                     | OANCE WI                                      | TH AND SUBJE        | ECT TO TERMS AND COM                | NDITIONS OF ABOV   | E NUMBERED CONTRACT.       |
| OF<br>ORDER   | PURCHASE                               |                      | Reference your Oral Written Quotation, Dated  furnish the following on terms specified herein. |                           |                                 |  |                                       |   |                     |                                     |  |                            |
|   |  |                      |  | E CONTRA                  | CTOR HEREI                      | BY ACCEPTS T   | THE OFFER REPRE                       |   |                     | MBERED PURCHASI<br>AND AGREES TO PE |  | MAY PREVIOUSLY HAVE<br>ME. |
| NAME OF CONTRACTOR SIGNATURE TYPED NAME AND TITLE DATE SIGNED (YYYYMMMDD)  If this box is marked, supplier must sign Acceptance and return the following number of copies:  17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE |  |                      |  |                           |                                 |  |                                       |   |                     |                                     |  |                            |
| SEE   | SCHEDULE                               |                      |  |                           |                                 |  |                                       |   |                     |                                     |  |                            |
| 18. ITEM  | NO. 19. SO                             | СНЕІ                 | DULE OF SUPPLIES/SI  | ERVICE                    |                                 |  | 20. QUANTITY<br>ORDERED/<br>ACCEPTED* | 7   | 21.<br>UNIT         | 22. UNIT PRICE                      | 23. AMOUNT   |                            |
|   | CONT<br>Fi<br>KINI                     | TRAC<br>irm-<br>D OI | HEDULE<br>CT TYPE:<br>-Fixed-Price<br>F CONTRACT:<br>ly Contracts and                          | d Price                   | d Orders                        |  |                                       |   |                     |                                     |  |                            |
|   | accepted by the                        |                      |  | 4. UNITED                 |                                 | GAPINSKI   |                                       |   |                     | 25. TOTAL<br>26.                    | \$42,180.00  |                            |
|   | t, enter actual qu<br>rdered and encir |                      | ty accepted below B  | BY:                       | MARIE.GA                        | PINSKI@US.   | ARMY.MIL (586                         |   |                     | ORDERING OFFICER                    | DIFFERENCES  | S                          |
|   | NTITY IN COLU                          | 7                    |  | ACCEPTEL                  | AND CONE                        | ODMS TO COM  | TD A CT EVCEDT A                      | NOTED   |                     |                                     |  |                            |
| INSPECTED RECEIVED ACCEPTED, AND CONFORMS TO CON  b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE  |  |                      |  |                           |                                 |  | c. DATE                               |   |                     |                                     | OF AUTHORIZE   | D GOVERNMENT               |
| e. MAILI  | NG ADDRESS (                           | )F A                 | UTHORIZED GOVERN   | MENT RE                   | PRESENTATI                      | VE   | 28. SHIP. NO.                         | 28. SHIP. NO. 29. D.O. VOUCHER NO.            |                     | CHER NO.                            | 30. INITIALS   |                            |
| f. TELEPHONE NUMBER g. E-MAIL ADDRESS   |  |                      |  |                           |                                 |  | FINAL                                 | <u> </u>                                      |                     |                                     |  | ZERIFIED CORRECT FOR       |
| 36. I CER   | TIFY THIS ACC                          | COU                  | NT IS CORRECT AND I  | PROPER F                  | OR PAYMEN                       | т.   | $\dashv$                              | 31. PAYMENT  COMPLETE                         |                     |                                     | 34. CHECK NUMBER   |                            |
| a. DATE b. SIGNATURE AND TITLE OF CERTIFYING OFFICER (YYYYMMMDD)  |  |                      |  |                           |                                 |  | 一一                                    | PARTIAL                                       |                     |                                     | 35. BILL OF LADING NO.   |                            |
|   |  |                      | 39. DATE RE  |                           | 40. TOTAL CO                    | DN-  | 41. S/R ACCOUNT NUMBER                |   | 42. S/R VOUCHER NO. |                                     |  |                            |

**CONTINUATION SHEET** 

## Reference No. of Document Being Continued PIIN/SIIN W56HZV-06-D-0072/0003 MOD/AMD

Page 2 of 3

Name of Offeror or Contractor: Lanzen fabricating inc

| ITEM NO | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE   | AMOUNT       |
|---------|---|----------|------|--------------|--------------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS   |          |      |              |              |
| 0012    | NSN: 2510-01-095-2422<br>FSCM: 19207<br>PART NR: 12269951<br>SECURITY CLASS: Unclassified   |          |      |              |              |
| 0012AA  | PRODUCTION QUANTITY   | 185      | EA   | \$ 228.00000 | \$ 42,180.00 |
|         | NOUN: COVER, MANHOLE PRON: EH75S876EH PRON AMD: 01 ACRN: AA AMS CD: 070011  |          |      |              |              |
|         | Packaging and Marking  PACKAGING/PACKING/SPECIFICATIONS:  SEE PACKAGING REQUIREMENTS CLAUSE  LEVEL PRESERVATION: Military  LEVEL PACKING: B   |          |      |              |              |
|         | Inspection and Acceptance INSPECTION: Origin ACCEPTANCE: Origin   |          |      |              |              |
|         | Deliveries or Performance           DOC         SUPPL           REL CD         MILSTRIP         ADDR         SIG CD         MARK FOR         TP CD           001         W56HZV7128T681         W62G2T         J         2           DEL REL CD         QUANTITY         DEL DATE           001         185         31-AUG-2007 |          |      |              |              |
|         | FOB POINT: Origin   |          |      |              |              |
|         | SHIP TO: (W62G2T) XU DEF DIST DEPOT SAN JOAQUIN 25600 S CHRISMAN ROAD REC WHSE 10 PH 209 839 4307 TRACY CA 95304-5000   |          |      |              |              |
|         | CONTRACT/DELIVERY ORDER NUMBER W56HZV-06-D-0072/0003  |          |      |              |              |
|         |   |          |      |              |              |
|         |   |          |      |              |              |
|         |   |          |      |              |              |
|         |   |          |      |              |              |

Reference No. of Document Being Continued **Page** 3 **of** 3 **CONTINUATION SHEET** PIIN/SIIN W56HZV-06-D-0072/0003 MOD/AMD Name of Offeror or Contractor: Lanzen fabricating inc CONTRACT ADMINISTRATION DATA PRON/ JOB 
 LINE
 AMS CD/
 OBLG

 ITEM
 MIPR
 ACRN STAT ACCOUNTING CLASSIFICATION
 ORDER ACCOUNTING OBLIGATED NUMBER AMOUNT STATION 0012AA EH75S876EH AA 2 97 X4930AC6D 6D 26FB S20113 W56HZV 42,180.00 070011 TOTAL \$ 42,180.00 ACCOUNTING OBLIGATED SERVICE TOTAL BY ACRN ACCOUNTING CLASSIFICATION AMOUNT NAME STATION Army AA 97 X4930AC6D 6D 26FB S20113 W56HZV \$ \_\_\_ 42,180.00

42,180.00

TOTAL

\$

<u>ACRN</u> <u>EDI ACCOUNTING CLASSIFICATION</u>

AA 97 0X0X4930AC6D S20113 76D00000700110000026FB S20113